PHARMACISTS' BULLETIN

NOVA SCOTIA SENIORS' PHARMACARE PROGRAM
PHARMACARE
NOVA SCOTIA DEPARTMENT OF COMMUNITY SERVICES

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MAY BULLETIN

NOVA SCOTIA CLOZAPINE PROGRAM

Effective June 1, 2005, clozapine for the treatment of refractory bipolar disorder will be funded through the Nova Scotia Clozapine Program (previously restricted to schizophrenia and schizoaffective disorder) for patients who do not have third party insurance.

The Nova Scotia Clozapine Program is funded by the Department of Health and administered by Capital Health (the Nova Scotia Hospital site). The Program provides funding for clozapine to patients in the province through an approval/application process. For information on this process contact the pharmacist at Nova Scotia Hospital, 464-3269.

Once the funding approval and manufacturer's blood monitoring registration processes have taken place, the prescription may be dispensed from any hospital or community pharmacy upon the receipt of a prescription. The hospital or community pharmacy obtains the stock of clozapine for outpatient/day patient use from the Provincial Drug Distribution Program (PDDP) by obtaining purchasing authorization from the Nova Scotia Hospital Pharmacy. Authorization to cover dispensing fees for patients having their prescription filled in a community pharmacy must be authorized by and billed to Pharmacare.

CHANGE TO EXCEPTION CRITERIA FOR RESPIRATORY FLUOROQUINOLONES

The criteria for Respiratory Fluoroquinolones (Gatifloxacin, Levofloxacin, Moxifloxacin) has been modified to include the treatment of nosocomial pneumonia. The criteria is:

- for the completion of therapy instituted in the hospital setting for the treatment of nosocomial and community acquired pneumonia ***[Criteria Code 01]***
- for the treatment of severe pneumonia in nursing home patients ***[Criteria Code 02]***

CHANGE TO MAXIMUM ALLOWABLE COST LIST

The Maximum Allowable Cost (MAC) on the following category will be ***effective June 1, 2005***. Enclosed is the replacement page for your February 2005 MAC List which reflects this change.

IMIPRAMINE 25mg Tab **0.1733**

A REMINDER TO PHARMACIES . . .

Please be reminded of the terms and conditions in your Confirmation of Agreement with the Nova Scotia Pharmacare Programs. The Tariff Agreement states pharmacies agree not to charge the Pharmacare Programs more that the usual and customary charge to cash customers.

INCLUDED WITH THIS BULLETIN:

- **New Products List** *eff. June 1, 2005*
- **Interchangeable Products List** *eff. June 1, 2005*
- **Replacement page for February 2005 MAC List**

The Nova Scotia Drugs and Therapeutics Committee has designated **Gen-Clozapine interchangeable with Clozaril**.

Reducing the Risk of Agranulocytosis

One of the major risks associated with the use of clozapine is the potential for patients to develop agranulocytosis. Health Canada has put strict controls in place to ensure that all patients receiving clozapine are carefully monitored to maximize safety.

The product monographs for both Clozaril and Gen-Clozapine specify that weekly blood tests are required for the first 26 weeks of therapy. The frequency of testing may then be reduced to once every two weeks if the patient's clinical condition permits. **There is no change in monitoring frequency required in the event of brand switches.** The blood tests required are white blood cell count (WBC) and differential count. The monographs establish clear limits about when to withhold or discontinue the drug.

If a patient is found to be non-rechallengeable they must not receive clozapine ever again. With clozapine now available from multiple sources, the ability to identify non-rechallengeable patients is critical to the safe dispensing of clozapine.

If a patient is found to have non-rechallengeable status, they may not receive any brand of clozapine.

Health Canada Requirements for Switching Brands of Clozapine

Health Canada has mandated that each approved manufacturer of clozapine must provide a national database to control the distribution of the drug, monitor hematological testing and provide an efficient exchange of information with health professionals.

Health Canada has stated that clozapine brand switches **should not be done unless** the pharmacist obtains a **new, registry-specific** patient registration form filled out by the prescribing physician.

Health Canada has also stated that the prescribing physician is ultimately responsible for verifying the patient's hematological/non-rechallengable status.

The pharmacist is encouraged to verify the patient's hematological/non-rechallengable status with all existing clozapine registries.

The safe dispensing of clozapine requires co-operation between the prescribing physician and dispensing pharmacist and the efficient exchange of information between health professionals and the clozapine registries.

What does this mean for patients?

Patients who are taking Clozaril may now have their prescriptions filled with either Clozaril or Gen-Clozapine. Patients with schizophrenia, schizoaffective disorder and bipolar illness, and authorized for funding through the Nova Scotia Clozapine outpatient program, will have their prescriptions filled with one contracted brand as defined by the supplier for this program. Dispensing for this outpatient program occurs primarily in hospitals, but is also occurring in community pharmacies. Those patients not covered by this program (i.e. those with third party coverage and/or being treated for other indications) may be switched from brand to brand as defined by the Pharmacy providing care. Because of the extra steps required to register a patient when switching brands, frequent changes between brands is not expected.

Patients should not experience any change in the control of their schizophrenia as a result of a brand change.

Patients must be enrolled in the database provided by the clozapine manufacturer.

NEW PRODUCTS

The following products are "New Listings to the Nova Scotia Formulary" ***effective June 1, 2005***. The benefit status of each product within the Nova Scotia Pharmacare Programs is indicated.

DIN	PRODUCT	MFR	BENEFIT STATUS
02256193	Cesamet 0.5mg Cap	ICN	SFC
02247499	Climara 25 (25mcg/day, 2mg patch)	BEX	E*
02247500	Climara 75 (75mcg/day, 5.7mg patch)	BEX	E*
02246804	Levaquin 750mg Tab	JAN	not insured
02249002	Nutropin AQ Pen Cartridge	HLR	E*
02256290	Relpax 20mg Tab	PFI	not insured
02256304	Relpax 40mg Tab	PFI	not insured
02257130	Sensipar 30mg Tab	AMG	not insured
02257149	Sensipar 60mg Tab	AMG	not insured
02257157	Sensipar 90mg Tab	AMG	not insured
00689726	Vitamin B_{12} 500mcg Tab	SWS	E*
02256460	Vfend 50mg Tab	PFI	E
02256479	Vfend 200mg Tab	PFI	E

*Criteria already established will apply

CRITERIA FOR COVERAGE:

Voriconazole (Vfend)
- for the treatment of patients with confirmed invasive aspergillus

INTERCHANGEABLE PRODUCTS ADDED TO NOVA SCOTIA FORMULARY

Effective June 1, 2005

EXISTING CATEGORIES:

Note: For those products with benefit status under the Nova Scotia Pharmacare Programs, the existing MAC will apply.

	DIN	Product	MFR	Benefit Status
ACEBUTOLOL HCl 100mg Tab	02257599	Rhoxal-Acebutolol	RHO	SF
ACEBUTOLOL HCl 200mg Tab	02257602	Rhoxal-Acebutolol	RHO	SF
ACEBUTOLOL HCl 400mg Tab	02257610	Rhoxal-Acebutolol	RHO	SF
ZOPICLONE 5mg Tab	02257572	Rhoxal-Zopiclone	RHO	SFC
ZOPICLONE 7.5mg Tab	02257580	Rhoxal-Zopiclone	RHO	SFC

NEW CATEGORIES:

Note: Until a MAC price is established, AAC will be paid for those products with benefit status under the Nova Scotia Pharmacare Programs. These categories will appear in the next publication of the MAC List.

	DIN	Product	MFR	Benefit Status
CLOZAPINE 25mg Tab	02247243	Gen-Clozapine	GPM	not insured
	00894737	Clozaril	NVR	not insured
CLOZAPINE 100mg Tab	02247244	Gen-Clozapine	GPM	not insured
	00894745	Clozaril	NVR	not insured